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K012017 VARJAN medical systems

Oncology Systems 3100 Hansen Way Palo Alto, CA 94304-1038 USA tel +1 650 493 4000 www.varian.com

Premarket Notification [510K] Summary as required by 21 CFR 807.92

Date Summary was prepared:

June 7, 2001

Submitter's Name:

Varian Medical Systems 3140 Hansen Way F-055 Palo Alto, CA 94304

Contact Person:

Linda S. Nash
Corporate Director, Regulatory Affairs and Quality Assurance
Phone (650) 424-6990
FAX (650) 842-5051
E-Mail linda.nash@os.varian.com

Device Name:

VariSeed 7.0

Classification Name:

Source, Brachytherapy, Radionuclide

Predicate Device:

MMS TherapacPLUS B3DTUI, K982821 and Brachyvision, K992762

Product Description:

See the Software Description of the Device, Tab ${\bf E}$

Intended Use:

VariSeed 7.0 is a software application used for planning and evaluation of permanent implant brachytherapy procedures.

Technological Characteristics:

See the "Substantial Equivalence Comparison Chart", Tab F.





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Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Ms. Linda Nash
Director, Regulatory Affairs and Quality Assurance
Varian Medical Systems, Inc.
3100 Hansen Way
PALO ALTO CA 94304-1038

Re: K012017
VARISEED 7.0
(Brachytherapy Treatment Planning System)
Dated: June 25, 2001
Received: June 28, 2001
Regulatory Class: II
21 CFR 892.5730/Procode: 90 MUJ

Dear Ms. Nash:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4639. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours,

Nancy C. Brogdon

Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

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510(k) Number (if known): <u>KOIZ 017</u>
Device Name: Vari Seed 7.0
Indications For Use:
VariSeed 7.0 is a software application for planning and evaluating permanent implant brachytherapy procedures for the treatment of prostate cancer with permanent implants that can be modeled according to AAPM TG-43. It facilitates pre-operative planning and post-operative evaluation as well as intra-operative planning and evaluation.
(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)
Concurrence of CDRH, Office of Device Evaluation (ODE)
Saint be Segum
(Division Sign-Off) Division of Reproductive, Abdominal, and Radiological Devices 510(k) Number
Prescription Use OR Over-The-Counter Use (Per 21 CFR 801.109)
(Optional Format 1-2-96